

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

08/945089

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE ☐

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	13 minus 20 = *	-
INDEPENDENT CLAIMS	1 minus 3 = *	-
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEE
	395.00
x\$11=	
x41=	
+135=	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	930 790.00
x\$22=	
x82=	
+270=	
TOTAL	930

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

08/945089

SERIAL NUMBER _____

TO: OFFICE OF FINANCE
FROM: CRYSTAL PLAZA 2, LOBBY

PLEASE PROCESS THE FOLLOWING COLLECTIONS:

FEE CODE	AMOUNT	FEE CODE	AMOUNT
BASIC FEE		CLAIMS/MULTIPLE DEPENDENT	
<u>960</u>	<u> </u>	<u>964</u>	<u> </u>
<u>961</u>	<u> </u>	<u>965</u>	<u> </u>
<u>970</u>	<u>936.⁰⁰</u>	<u>966</u>	<u> </u>
<u>971</u>	<u> </u>	<u>967</u>	<u> </u>
<u>958</u>	<u> </u>	<u>968</u>	<u> </u>
<u>959</u>	<u> </u>	<u>969</u>	<u> </u>
<u>956</u>	<u> </u>	LATE FEES/SURCHARGE	
<u>957</u>	<u> </u>	<u>154</u>	<u> </u>
<u>962</u>	<u> </u>	<u>254</u>	<u> </u>
<u>963</u>	<u> </u>	<u>156</u>	<u> </u>
OTHER :		<u>581</u>	<u>40.⁰⁰</u>
<u> </u>	<u> </u>		
<u> </u>	<u> </u>		
<u> </u>	<u> </u>		

THE ORIGINAL METHOD OF PAYMENT

4 BY A CHECK (2 Chs) BY A CHARGE TO DEPOSIT ACCOUNT NO. _____

DO/EO FEE

SHENE' MAGEE